

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO.  
10-049,277

APPLICATION

CLAIMS

CLAIMS	AS FILED		AFTER RECEIPT OF AMENDMENT		AFTER RECEIPT OF AMENDMENT		AMOUNT
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1							
2							
3	12						
4	10						
5	PT						
6	10						
7	6						
8	10						
9	1						
10	1						
11							
12							
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47							
48							
49							
50							
TOTAL IND.	12						
TOTAL DEP.	8						
TOTAL TOTAL	10						
TOTAL AMOUNT							

PTO-876 (5-70)